

State of Minnesota**District Court**

County

Judicial District: _____

Court File Number: _____

Case Type: Criminal

State of Minnesota,

Plaintiff

vs.

**Statement of Rights
First Court Appearance
on Extradition Proceedings**

_____,

Defendant

A. I understand that:

1. The State of _____ alleges that I have:
 - ☐ been charged with a crime and not appeared in court;
 - ☐ broken the terms of bond or bail;
 - ☐ been convicted of a crime and violated conditions of release, the sentence, probation or parole;
 - ☐ escaped from custody;
 - ☐ other (specify): _____
2. The State of _____ seeks my return, has advised Minnesota authorities of the facts noted above, and intends to or has started extradition proceedings for my return.
3. I must decide whether to:
 - (a) challenge the legality of my arrest;
 - (b) fight my extradition (return) to the State of _____.

B. I acknowledge that I have received a copy of any complaint or extradition papers that have been issued, and I have been given a Waiver of Extradition form.

C. I understand that:

1. I have the right to be represented by an attorney.
2. An attorney will be appointed to represent me if I cannot afford to pay for an attorney.
3. I do not have to say anything about the facts or circumstances of the case.
4. Anything I do say can be used against me.
5. I have the right to challenge the legality of my arrest and to apply for a Writ of Habeas Corpus.
6. I have the right to fight my extradition (return) to the State of _____.

7. I have the right to speak to an attorney before deciding whether to challenge my arrest or to fight extradition.
8. I have the right to have bail set.

D. I also understand that:

1. If I waive extradition, I may be held in custody until authorities from the State of _____ come to get me.
2. If I fight extradition, I may be held in custody for up to 30 days (or possibly as long as 90 days) in order to permit the State of _____ to begin extradition proceedings against me.

E. I wish to (check one):

- ☐ request a court-appointed attorney and have completed a form regarding my income, property, and expenses.
- ☐ request a continuance to consult a private attorney.
- ☐ waive (give up) my right to have an attorney.

F. I wish to (check appropriate box):

- ☐ challenge the legality of my arrest.
- ☐ waive (give up) my right to challenge the legality of my arrest.
- ☐ fight my extradition (return) to the State of _____.
- ☐ waive (give up) my right to fight my extradition (return) to the State of _____.

Dated: _____

Signature _____ Date of Birth _____

Your attorney: _____

Your Name: _____

Street Address: _____

Street Address: _____

City/State/Zip: _____

City/State/Zip: _____

Telephone: () _____

Telephone: () _____

E-mail address: _____

E-mail address: _____